

**WIREGRASS  
MENTAL HEALTH BOARD, INC.  
DBA  
SPECTRACARE**

**STRATEGIC**

**PLAN**

**2007 - 2012**

WIREGRASS MENTAL HEALTH BOARD INC.  
DBA  
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STRATEGIC PLAN

I Agency Overview

Wiregrass Mental Health Board, Inc. dba SpectraCare here after called the Board is a public non-profit corporation formed in 1968 in the State of Alabama. The Board is a comprehensive community mental health system providing mental health, mental retardation, and substance abuse services to the citizens of Barbour, Dale, Geneva, Henry and Houston Counties. The system is organized by service divisions (see attached organizational chart).

II Current Status

The current status population of the service area as of the 2000 census is 209,000. The Wiregrass Mental Health Board provides mental illness and substance abuse services in all five counties of its service area. Mental retardation services are provided in three counties; Geneva, Henry and Barbour. Mental retardation services are provided by separate MR 310 Boards in Houston and Dale county. Services are provided to the mentally ill through outpatient clinics in each county, accessibility to intensive day treatment, and psycho social rehabilitation in all counties in addition to the availability of group homes, foster homes and supportive apartments. Substance abuse outpatient services are available in the five county service area, to include prevention, court referral, intensive outpatient services and a crisis residential program in Houston County. Mental retardation services include day habilitation programs in Geneva, Henry and Barbour and an adult group home in Geneva County. Dale County has a supervised community living home.

III Assessment of Stakeholders

This plan was developed by the Wiregrass Mental Health Board, Inc. Board of Directors in conjunction with the Executive Staff of Wiregrass Mental Health Board, Inc. during its monthly Board Meeting. The Executive Staff provided information gained from a variety of sources including consumers, family members, staff, probate judges, mayors, and community leaders.

#### IV Mission

The mission of Wiregrass Mental Health Board, Inc. is to provide quality mental health, mental retardation, and substance abuse services within the limits of available resources to citizens of Barbour, Dale, Geneva, Henry and Houston Counties, and to assure that these services are provided with respect for the individual's dignity and privacy in the least restrictive environment necessary to promote recovery.

#### V Vision

Wiregrass Mental Health Board's vision is that the quality mental health, mental retardation, and substance abuse services that they provide will promote the health and general welfare of the people of Barbour, Dale, Geneva, Henry and Houston Counties.

#### VI Value and Philosophy

Wiregrass Mental Health Board is committed to providing services that will promote positive consumer, family and provider relationships, and to establish priorities for services provided with primary emphasis on the seriously mentally ill, substance abuse, and mental retardation population. To this end the Board's primary goal is to provide quality services in an effective and economical manner.

Wiregrass Mental Health Board's Performance Improvement Plan monitors and evaluates the following outcome and quality measures:

1. Goal I: To continue to maintain financial stability of organization. (See attachment for objectives)
2. Goal II: To continue to strengthen staff competence. (See attachment for objectives)
3. Goal III: To provide a user friendly and effective treatment environment. (See attachment for objectives)
4. Goal IV: To continue to provide treatment services that meet applicable standards, third party requirements, contract requirements and internal quality indicators. (See attachment for objectives)

The Executive Staff will collect and analyze data related to the above stated goals. This data analysis will be reviewed to effect change for effective and efficient operation. The Strategic Plan will be reviewed on an annual basis for needed revisions. The Board of Directors will review, revise and approve the Strategic Plan annually.

#### VII Greatest Needs

1. Mental Retardation Services

- A. MR state matching funds
  - B. MR waiting list
  - C. Need for more residential services to meet future needs
2. Mental Illness Services
- A. Additional local hospital beds for MI
  - B. Additional funding for residential services for MI
  - C. Co-occurring services
  - D. Crisis stabilization unit
  - E. Expansion of liaison programs
  - F. Expansion as indicated by consumer need for therapists in Barbour, Dale, Geneva and Henry counties to reduce case loads and provide more children/adolescent services
3. Substance Abuse Services
- A. Adolescent intensive outpatient services
  - B. Detox services
  - C. Additional funding for residential beds
  - D. Funding for co-occurring residential services
4. Business/Financial
- A. Staff development and training in Business Ethics and Employee Code of Conduct
  - B. Capital assets accountability
5. Human Resources
- A. Staffing of residential facilities
  - B. Retention of long-term staff
  - C. Web-based training for staff
6. Quality Assurance
- A. Implementation of Internal Compliance Plan
  - B. Raising key performance improvement indicators to an error of 5% or less
7. Information Technology
- A. Electronic capital asset inventory
  - B. Conversion to electronic health records

## VIII Current Funding Resources

The majority of funding is provided by the Alabama Department of Mental Health and Mental Retardation (DMH/MR). A significant amount of the funds received are Medicaid federal funds passed through DMH/MR. Other sources of revenue include patient fees, private pay insurance, local government appropriations and United Way.

## IX Future Funding Resources

- A. With an improving economy we hope to see funding restored from Counties and Cities that reduced or eliminated prior funding support.
- B. It appears that any additional funding of any significance will come from DMH/MR through outplacement/bed reduction at State facilities.
- C. When possible, grants for additional funding will be pursued.
- D. It is hoped that the State Department of Mental Health will be able to sustain the current funding levels or increase funding for current community services.

## X Communications

The Strategic Plan will be available for review by each staff member of Wiregrass Mental Health Board, Inc. Executive staff will review the Plan quarterly and update annually if needed with the Board of Directors approval.

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Goal #1: Maintain financial stability of Organization.

Objective	Evaluation Method	Person(s) Responsible	Dates	Reviewed By
Monitor Financial Status	Current Financial Reports; Budget Reports	Financial Director	Quarterly or more frequent if justified	Executive Staff; Board of Directors
Monitor Billings and Collections	Accounts Receivable Trends and Reports	Finance Director; Program Directors	Monthly	Executive Staff
Monitor Program Services and Trends	Quarterly Staff Meetings; Service and Trend Reports	Program Directors	Monthly and Quarterly	Executive Staff CQI

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Goal #2: Strengthen staff competency.

Objective	Evaluation Method	Person(s) Responsible	Dates	Reviewed By
Staff Evaluations	Staff Supervision; Performance Appraisals; and CQI	Human Resources Director	Annually	Executive Staff
Provide Appropriate Inservice Training	Content and Attendance Evaluations; Monthly Assessments of Admin. Records	Executive Staff	Quarterly	Executive Staff; CQI Committee
Provide Appropriate CEU's	Licensure Requirements	Human Resources Director	Annually	Executive Staff; Program Directors

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Goal #3: To provide a user friendly and effective treatment environment.

Objective	Evaluation Method	Person(s) Responsible	Dates	Reviewed By
Ensure Safety of and Access to Facility	Fire Safety Reports; DMH/MR Facility Inspection Reports; Health Inspections	Executive Staff; Maintenance Supervisor; Nurses	Monthly and Annually	Executive Staff
Ensure Consumer Care is Provided in Compliance with Consumer Rights and Ethical Standards	DMH/MR Advocacy Abuse Neglect Reports; Grievance Procedure; Consumer Meetings	CQI; Executive Staff	Monthly	CQI Program Directors; Executive Staff; CQI Committee
Ensure Consumer Care is Provided by Friendly and Caring Staff	Consumer Satisfaction Surveys; Advocacy	Program Directors; Executive Staff when applicable	As required	CQI Committee; Executive Staff



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Goal #4: To maintain compliance with required standards and contractual obligations.

Objective	Evaluation Method	Person(s) Responsible	Dates	Reviewed By
Ensure Policies and Procedures Meet State Standards	Review Policies and Procedures and Compare to State Standards	Executive Staff; CQI Director	Annually	Board of Directors
Ensure Contract Requirements are met	Review Contract Requirements; DMH/MR Site Report; and Audits	Executive Staff; CQI; CPA	Annually or Upon Effective Date of Contract	Executive Director; Board of Directors
Monitor Performance Improvement Plan	Analyze Performance Improvement Reports; Review Performance Indicators	Executive Staff	On Going	Executive Staff; Board of Directors
Ensure Compliance with Site Visit Requirements to include Standards and Contract Requirements	Review Site Visit Reports; Annual Audits	Executive Staff	Annually	Executive Staff; Board of Directors

## **ACCOMPLISHMENTS**

### **2004-2006**

#### **MENTAL ILLNESS**

1. Maintained census reduction consistently as required by DMH/MR.
2. Acquired and began supervision of three new apartment complexes with a total of thirty apartments.
3. Expanded MI staffing to include the following:
  - a. three apartment manager positions
  - b. two juvenile court liaison positions
  - c. two secretarial positions to include one "floating" secretary
  - d. one MHT for the foster homes
4. Renovated the Houston County Clinic.
5. Purchased eleven new vehicles.
6. Received two Partner awards from the Governor's Committee on Hiring People with Disabilities.
7. Increased community collaboration by creating additional liaison positions with Vocational Rehabilitation Services and Southeast Alabama Medical Center.

#### **MENTAL RETARDATION**

1. Admitted one consumer at Barbour County and two at Henry County, and two at Johnson Group Home from waiting list.
2. Improved transportation by the addition of two new buses at Purvis Center, and new vans at Henry and Barbour County programs.
3. Renovated Henry County MR facility and workshop.
4. Established a Human Rights Committee.
5. Replaced air conditioning equipment at Parramore Center through City of Eufaula grant funding.
6. Repainted and refurbished building at Purvis Center.

7. Installed new flooring at Johnson Group Home.

### **SUBSTANCE ABUSE**

#### **THE HAVEN:**

1. Enhanced clinical services on the weekend by scheduling a full time clinician to provide group, individual and family therapy on Saturday and Sunday.
2. In collaboration with Alcoholics Anonymous, began providing institutional AA meetings bi-weekly at the Haven.
3. Renovated building to include new paint, new floor covering and kitchen equipment.

#### **INTENSIVE OUTPATIENT PROGRAM:**

1. Maintained groups in Dale and Geneva Counties.
2. Increased referrals from Barbour and Henry counties, resulting in need to add Barbour County IOP.
3. Added a permanent IOP night group in Houston County.
4. Increased number of mobile assessments performed at county clinics.
5. Began providing assessments in Barbour, Houston, and Geneva County jails.

#### **COURT REFERRAL:**

1. Added a full time monitoring specialist to the court referral program staff allowing more clients to be seen for monitoring appointments each month and decreasing wait time for initial evaluation.
2. Enhanced drug screening program providing more reliable and accurate results.

#### **PREVENTION SERVICES:**

1. Expanded prevention services in Dale County through Dale County Coalition grant.
2. Established the Coalition for a Tobacco Free Wiregrass.
3. Expanded prevention education programs in all five counties.
4. Increased media attention and knowledge of the system's programs.

## **BUSINESS/FINANCE**

1. Business and Finance policies and procedures were reviewed, updated, and placed on the Intranet site for access by staff at all times.
2. Held budget meetings with MI program directors. Emphasis placed on trends and responsibility for financial operations within programs. Staff trained in the review of trends and financial reports.

## **HUMAN RESOURCES**

1. Reviewed and revised policies and procedures and placed them on the Intranet site for employee accessibility.
2. Maintained low unemployment tax rate.
3. Instituted safety program which resulted in a discount for Worker's Compensation insurance cost.
4. Implemented means for staff to obtain Licensed Professional Counselor status through SpectraCare.
5. Participated in National Health Service Corp. approved agency program to obtain Psychiatrist.
6. Marketed employment opportunities in major universities in Alabama and southwest Florida and Federal Civilian Employment programs.
7. Defended all employment law claims resulting in every decision favoring employer.
8. Implemented revision of compensation plan to make salaries more competitive with applicable market.
9. Implemented new payroll/time keeping programs offering more efficient payroll information for supervisors.
10. Expanded staff orientation program to insure compliance with funding agencies.

## **QUALITY ASSURANCE**

1. Purchased scanning equipment in February 2005 which gave the Quality Assurance department the capability of archiving records.

2. Increased reviews of each MI clinician's caseload every three months. Increased reviews of SA charts based on admissions in prior fiscal years. Exceeded goal for review of MR charts.

### **INFORMATION TECHNOLOGY**

1. Continued to upgrade our information management system.
  - A. Installed a SEQUEL software product that enables report generation from our database.
  - B. Installed Kronos Workforce Central to help control labor expense and to reduce other cost.
  - C. Installed imaging software to reduce cost involved with handling paper.
  - D. Continued to update current software products to secure investment.
  - E. Hired additional staff to help move toward electronic records faster and to help with user support of our systems.
  - F. Added computers where necessary to increase efficiency.
  - G. Created the SpectraCare website and began providing the SpectraCare Intranet making information easier to access.
2. Improved telecommunications and reduced cost.
  - A. Converted all frame relay connections to high speed connections improving performance and significantly reducing cost.
  - B. Made improvements in email capabilities.
3. Continued to enforce security on network.
  - A. Updated our firewall and antivirus protection to remain current against threats. Monitored network activity to insure compliance with usage policies.

## **SHORT (2007-2009) AND LONG TERM GOALS (2009-2012)**

### **MENTAL ILLNESS GOALS**

#### **Short Term Goals (2007-2009)**

1. Maintain required census in state hospital beds.
2. Renovate facilities.
3. Finalize the plan for Acute Care.
4. Utilize or sell Cottonwood facility.
5. Establish dual diagnosis services.
6. Increase financial responsibility and accountability of medical department.
7. Monitor increased staff needs.
8. Establish services that begin to address the specific needs of the geriatric population.
9. Continue expansion of Liaison program.
10. Resolve relief staff issue at Samson.
11. Address issue of psychiatric admitting privileges at BMU.
12. Partner with QA for more focused clinical quality reviews rather than major administrative focus.

#### **Long Term Goals (2009-2012)**

1. Acquire new Webb II facility.
2. Implement Acute Care plan.
3. Establish co-occurring facility.
4. Increase number of foster home beds or develop "just be" facility.
5. Insure utilization of clinical program by all clinical staff.
6. Continue to monitor increased staff needs.

7. Increase services as funding allows.
8. Renovate Samson from "front" to "back" for client relaxation.
9. Place all MI forms, policies and procedures, etc., on the Intranet.

### **MENTAL RETARDATION**

#### **Short Term Goals (2007-2009)**

1. Implement DMH/MR MRSIS program and train appropriate staff.
2. Implement the Nurse Delegation Program for all residential staff.
3. Fill available slots from MR waiting list as funding permits.
4. Complete facility repairs and maintenance as needed in MR facilities.

#### **A. PARRAMORE CENTER**

1. Replace blinds in building.
2. Replace cabinets, addition of stove and refrigerator in kitchen area.
3. Repaint office doors and classroom doors
4. Provide furniture for sitting area in hallway or waiting room area.

#### **B. PURVIS CENTER**

1. Repair and replace as needed porch posts, back columns and retaining wall.
2. Replace or repair leaking roofs.
3. Repair curbing.
4. Repair wash in drive in front of workshop.
5. Paint inside classrooms and restrooms.
6. Address staffing issues with retirement of long-term employees.

C. JOHNSON GROUP HOME

1. Correct soil erosion and draining problems on side and front of building.
2. Replace telephone equipment.
3. Purchase new copier.

D. HENRY COUNTY

1. Replace chairs in dining area, copier and washing machine.

E. CASE MANAGEMENT

1. Obtain computer in Barbour County.
2. Access software to assist in billing and information.

Long Term Goals (2009-2012)

1. Continue to provide on-going training and implementation of MRSIS program.
2. Continue implementation of the Nurse Delegation Program.
3. Continue to fill available MR slots as funding will allow.
4. Explore funding options for increasing residential services.
5. Complete facility repairs as outlined on MR facilities.

A. PARRAMORE CENTER

1. Renovate men and women's restrooms.
2. Acquire new furniture for classrooms.

B. PURVIS CENTER

1. Repaint outside of building.
2. Add more parking spaces.



C. JOHNSON GROUP HOME

1. Improve physical conditions inside and outside of building; paint, replace torn formica, and replace torn wallpaper in bathrooms.
2. Add a drive-up overhang to aid in loading and unloading consumers in adverse weather conditions.
3. Add screened porch for consumers.

**SUBSTANCE ABUSE**

THE HAVEN:

Short Term Goals (2007-2009)

1. Update curricula. Replace video's currently being used with DVD's and replace VCR's with DVD players.
2. Obtain clinical staff certification through AADAA.
3. Replace Haven vans.
4. Recognize volunteer pastors/other volunteers on a regular basis.

Long Term Goals (2009-2012)

1. Continue to work with Haven Board on new building for the program by 2017.
2. Enhance/expand services to consumers with co occurring disorders. Improve staff competency in treating consumers with co occurring disorders.

INTENSIVE OUTPATIENT:

Short Term Goals (2007-2009)

1. Reduce wait time for initial assessment.
2. Utilize L&W scheduling software.
3. Maintain IOP groups in each county.
4. Obtain clinical staff certification through AADAA.

5. Update curricula. Replace video's currently being used with DVD's and replace all VCR's with DVD players.

#### Long Term Goals (2009-2012)

1. Enhance/expand services to consumers with co occurring disorders. Improve staff competency in treating consumers with co occurring disorders.

#### COURT REFERRAL:

##### Short Term Goals (2007-2009)

1. Increase drug screen revenue through expanded list of referral sources for testing.
2. Increase number of CRP education classes (JADE, anger mgmt., Level 2).
3. Utilize L&W scheduling software.
4. Decrease initial wait time for evaluation appointment.
5. Paint building interior, replace flooring throughout building. Update front reception office to include built in desk and storage and increased space for filing cabinets.

##### Long Term Goals (2009-2012)

1. Work with Dothan City Court to secure an office in the court room, thus enabling CRO to perform evaluations and monitors on site for city court clients.
2. Diversify types of courses offered through CRP education program, consider classes for shoplifting, divorce, etc. Consult with judges to determine area of need for education classes within each CRP education county (Houston, Henry, Barbour).

#### PREVENTION:

##### Short Term Goals (2007-2009)

1. Upgrade certification of Prevention Specialists through AADAA.
2. Increase community awareness of SpectraCare's SA prevention services. Utilize media outlets, speaking engagements in the community to accomplish.
3. Identify alternate funding sources for direct service SA prevention education programs that

were cut due to new DMH funding priorities (funding environmental rather than education programs).

#### Long Term Goals (2009-2012)

1. Establish Drug Free Coalitions in Henry and Geneva counties.

### **BUSINESS/FINANCE**

#### Short Term Goals (2007-2009)

1. Payroll and HR functions - Create a seamless transition from employee benefits to payroll and reconcile employee benefits monthly by computer; verify benefits monthly by computer; replace software if needed.
2. Capital assets - perform physical inventory of assets annually and reconcile location and computer database records; implement new software and database.
3. Develop new Ethics and Employee Code of Conduct; train on a yearly basis; provide handbook with examples and specifics.
4. Begin the development of a records retention policy for Business Office; move from paper documents in Business Office to electronic storage; destroy records in a timely manner.
5. Implement training that will allow program directors to begin accessing program financial data independently.

#### Long Term Goals (2009-2012)

1. Capital assets - Continue to perform physical inventory of assets and reconcile to location and computer database records.
2. Closeout of monthly financial records - Enhance ability to close books by 5<sup>th</sup> of month in order to provide more timely reports to management.
3. Provide ability for all program directors and management to retrieve service data with minimum effort and know how.
4. Continue records retention policy for Business Office and destruction of records in a timely manner.
5. Store inservice documents, EOB's, on scanning system with daily reconciliation.

6. Integrate quality assurance in all financial areas including cash receipts, accounts payable, etc.
7. Revise Ethics and Employee Code of Conduct Handbook as needed on an annual basis.

## **HUMAN RESOURCES**

### **Short Term Goals (2007-2009)**

1. Revise methodology for staffing of residential facilities.
2. Research and revise pay structure for staff.
3. Revise benefit package for staff with emphasis on expanded benefits for longer tenured staff.
4. Establish committee and schedule for staff social activities.
5. Establish web based training for staff with emphasis on compliance issues.
6. Expand quarterly "live" staff training to areas of acute interest or need.
7. Establish policies and programs to retain long term staff.
8. Provide means for staff to obtain Professional Counselor license.
9. Maintain positive rating to continue minimizing cost of Workman Comp and Unemployment Compensation.
10. Continue compliance with Federal and State Labor and Department of Transportation Laws.
11. Establish on-going management training.

### **Long Term Goals (2009-2012)**

1. Insure compensation package is competitive with geographic area.
2. Have 50% of qualified staff obtain licensure.
3. Establish job succession program.
4. Establish training budget for individual staff members.

## **QUALITY ASSURANCE**

### **Short Term Goals (2007-2009)**

1. Implement the Internal Compliance Plan (based upon the Office of Inspector General's guidelines). Implementation will be in 2007. Training to be done at implementation and annually.
2. Assist in development of policies/procedures regarding electronic health records (to coincide with the implementation of the EHR).
3. Continue the QA review of billing and clinical documentation with a goal to raise all key Performance Improvement Plan indicators to 95% or better by the end of FY2008 (error rate of 5% or less). The plan is to develop new key indicators as the goal of 95% or better is attained.
4. Continue scanning terminated charts and prior volumes at an average rate of 40 records per week (2000 records per year). As we become more fully automated; scanning will be expanded to include forms that are not a part of the clinical system.

### **Long Term Goals (2009-2012)**

1. Implement and revise the Internal Compliance Plan as needed.
2. Develop and/or revise policies and procedures regarding electronic health records.
3. Maintain goal of 95% or better for key Performance Improvement Plan indicators.
4. Scan records and forms as needed to provide access to records electronically.

## **INFORMATION TECHNOLOGY**

### **Short Term Goals (2007-2009)**

4. Continue to upgrade the Information Management System.
  - A. Acquire and set up an electronic capital assets inventory and tracking system.
  - B. Expand our imaging software to improve efficiency.
  - C. Continue to replace old systems as needed.
2. Improve telecommunications and reduce cost.

- A. Stay abreast of new technologies and implement when feasible.
- 3. Maximize utilization of information.
  - A. Convert to electronic records.
- 4. Develop systems to comply with imposed security regulations.

Long Term Goals (2009-2012)

- 1. Continue to upgrade the Information Management System to meet the system's demands.
- 2. Improve telecommunications to improve effectiveness and reduce cost.
- 3. Continue the implementation of the electronic records to improve productivity and accessibility of information.
- 4. Continue to monitor systems to ensure compliance with security regulations.